

CLAIMS ONLY

SERIAL NO. _____

FILING DATE _____

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1			1			
2			1			
3			1			
4			1			
5			1			
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48						
49						
50						
TOTAL IND.			2			
TOTAL DEP.			6			
TOTAL CLAIMS			8			

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS